



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200  
Fax 613 632-5246

D350-567-143  
Job Sheet 186921



Part No: D350-567-143

Job Qty: 1 ea

Part Name: Floor Window Close Out (Energy Attenuating Seats)



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 11/22/18

Job Tracking No:

Due Date: 12/28/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: DSI 9590 REV.G IPP REV:A 13.04.01 AS PER DSI9590 REV.E DD VERF:JLM

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation          | Qty   | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off       |
|-------|--------------------|-------|------------|----------|-----------|---------|-----------------------|-----------|----------------|
|       |                    |       |            |          | Setup Hrs | Run Hrs | Workcenter / Supplier | Lead Time |                |
| 90    | Start up Operation | 1 Ea  |            | 12/28/18 | 0.00      | 0.00    | Start Up Stores/Pkg-2 |           | DEC 18 2018    |
| 110   | Packaging          | 1 pcs |            | 12/28/18 | 0.00      | 0.00    | Packaging1-3          |           | DEC 18 2018    |
| 120   | QC                 | 1 pcs |            | 12/28/18 | 0.00      | 0.00    | QC4                   |           | DEC 20 2018    |
| 130   | Packaging          | 1 pcs |            | 12/28/18 | 0.00      | 0.00    | Packaging3-1          |           | DAS 9-89 69    |
| 135   | DC                 | 1 pcs |            | 12/28/18 | 0.00      | 0.00    | DC                    |           | 21 DEC 21 2018 |
| 140   | QC21-FG            | 1 Ea  |            | 12/28/18 | 0.00      | 0.00    | QC21                  |           | 21 DEC 21 2018 |

Part Op 130 - Identify and pack for shipping as per PPP D350-567-143 Location: \_\_\_\_\_  
Descriptions: 135 - Photocopy bluefile & type labels per PPP D350-567-143 CHG001

### Job BOM

| Part / Item   | Component Name               | Quantity      | Operation             | Container  |
|---------------|------------------------------|---------------|-----------------------|------------|
| AN3-3A        | Bolt                         | 5 Ea (5 ea)   | 90-Start up Operation | 5056462    |
| AN525-10R6    | Screw                        | 2 Ea (2 ea)   | 90-Start up Operation | FMI137307  |
| AN525-832R7   | Screw                        | 2 Ea (2 ea)   | 90-Start up Operation | 5089346    |
| D3802-1       | Window Seal (\$ Per Foot)    | 2 ft (2 ea)   | 90-Start up Operation | 5104311    |
| D4434-041     | Fwd Bracket Assembly         | 1 Ea (1 ea)   | 90-Start up Operation | 5138492    |
| D4434-047     | Cover Assembly               | 1 Ea (1 ea)   | 90-Start up Operation | 5062704    |
| D4435-9       | Bracket                      | 2 Ea (2 ea)   | 90-Start up Operation | 5124805    |
| D4436-041     | Aft Bracket Assembly         | 1 Ea (1 ea)   | 90-Start up Operation | 5138610    |
| D4441-1       | Rubber Seal                  | 2 ft (2 ea)   | 90-Start up Operation | 5092167    |
| D4971-041     | T/R Bellcrank Cover Assembly | 1 Ea (1 ea)   | 90-Start up Operation | 5139468    |
| MS21042L06    | Nut                          | 7 Ea (7 ea)   | 90-Start up Operation | 5120515    |
| MS21042L08    | Nut                          | 2 Ea (2 ea)   | 90-Start up Operation | 5100409    |
| MS21042L3     | Nut                          | 5 Ea (5 ea)   | 90-Start up Operation | 5132364    |
| MS21059L3     | Nut Plate                    | 2 Ea (2 ea)   | 90-Start up Operation | 5083547    |
| MS35206-229   | Screw                        | 7 Ea (7 ea)   | 90-Start up Operation | 5067268    |
| NAS1149F0332P | Washer                       | 10 Ea (10 ea) | 90-Start up Operation | 5133206    |
| NAS1149FN616P | Washer                       | 14 Ea (14 ea) | 90-Start up Operation | 5089462    |
| NAS1149FN816P | Washer                       | 2 Ea (2 ea)   | 90-Start up Operation | 5117316.25 |

### Job Allocations

| Operation             | Component Part | Required | Inventory | Allocated |
|-----------------------|----------------|----------|-----------|-----------|
| 90-Start up Operation | AN3-3A         | 5        | 160       | 0         |



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                             |                                                |                                                 |                                                            |                                                |  |                                              |  |
|---------------------------------------------|------------------------------------------------|-------------------------------------------------|------------------------------------------------------------|------------------------------------------------|--|----------------------------------------------|--|
| Work Order: _____                           |                                                | DISPOSITION                                     |                                                            | AGAINST DEPARTMENT/PROCESS                     |  |                                              |  |
| Part No. _____                              |                                                | Rework <input type="checkbox"/>                 |                                                            | Skid-tube <input type="checkbox"/>             |  | Cross tube <input type="checkbox"/>          |  |
| NCR No. _____                               |                                                | Scrap <input type="checkbox"/>                  |                                                            | Machining <input type="checkbox"/>             |  | Water Jet <input type="checkbox"/>           |  |
|                                             |                                                | Use-as-is <input type="checkbox"/>              |                                                            | Thermoforming <input type="checkbox"/>         |  | Prod. Eng. Coord. <input type="checkbox"/>   |  |
|                                             |                                                | Suspected Unapproved <input type="checkbox"/>   |                                                            | Large Fab <input type="checkbox"/>             |  | Rec/Store/Packaging <input type="checkbox"/> |  |
| Date : _____                                |                                                | Step #: _____                                   |                                                            | QTY Effective : _____                          |  |                                              |  |
| Description Work Order Deviation            |                                                |                                                 |                                                            | Disposition                                    |  |                                              |  |
|                                             |                                                |                                                 |                                                            |                                                |  |                                              |  |
|                                             |                                                |                                                 |                                                            |                                                |  |                                              |  |
| Root Cause                                  |                                                |                                                 |                                                            | FAULT CATEGORY                                 |  |                                              |  |
| Environment <input type="checkbox"/>        | No Re-verification <input type="checkbox"/>    | Pressure/Forced <input type="checkbox"/>        | Temperature/Cure <input type="checkbox"/>                  | Power I <input type="checkbox"/>               |  |                                              |  |
| Design <input type="checkbox"/>             | Operator <input type="checkbox"/>              | Bending <input type="checkbox"/>                | Set-up <input type="checkbox"/>                            | Folio/P <input type="checkbox"/>               |  |                                              |  |
| Doc/Data <input type="checkbox"/>           | Offset/Setup <input type="checkbox"/>          | Centre Not Concentric <input type="checkbox"/>  | BOM/Route <input type="checkbox"/>                         | Grain <input type="checkbox"/>                 |  |                                              |  |
| Equip/Tooling <input type="checkbox"/>      | Supplier <input type="checkbox"/>              | Cracks <input type="checkbox"/>                 | Broken/Damage/Defect <input type="checkbox"/>              | Weld <input type="checkbox"/>                  |  |                                              |  |
| Handling/Pre <input type="checkbox"/>       | Training <input type="checkbox"/>              | Crimp/Kink/Ripple/Wave <input type="checkbox"/> | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/>    |  |                                              |  |
| Material <input type="checkbox"/>           | Use for Testing <input type="checkbox"/>       | Cuffs <input type="checkbox"/>                  | Contamination <input type="checkbox"/>                     | Out of Sequence <input type="checkbox"/>       |  |                                              |  |
| Internal Transport <input type="checkbox"/> | Poor Information <input type="checkbox"/>      | Crushing <input type="checkbox"/>               | Countersink <input type="checkbox"/>                       | Off-set <input type="checkbox"/>               |  |                                              |  |
| Tribal Knowledge <input type="checkbox"/>   | Rushing <input type="checkbox"/>               | Heat Treat <input type="checkbox"/>             | Cut Too Short <input type="checkbox"/>                     | Mislabeled <input type="checkbox"/>            |  |                                              |  |
| LOA <input type="checkbox"/>                | Product Improvement <input type="checkbox"/>   | Wave/Twist in Tube <input type="checkbox"/>     | Instructions Incomplete/Unclear <input type="checkbox"/>   | Fit/Function <input type="checkbox"/>          |  |                                              |  |
| Substation <input type="checkbox"/>         | Process Improvement <input type="checkbox"/>   | Marks/Chatter <input type="checkbox"/>          | Drill Holes <input type="checkbox"/>                       | Misaligned/off center <input type="checkbox"/> |  |                                              |  |
| Past Expiry Date <input type="checkbox"/>   | Manufacturing Process <input type="checkbox"/> |                                                 |                                                            |                                                |  |                                              |  |
| Misidentified <input type="checkbox"/>      | Past Due <input type="checkbox"/>              | OTHER : _____                                   |                                                            |                                                |  |                                              |  |



|               |    |       |   |
|---------------|----|-------|---|
| AN525-10R6    | 2  | 117   | 0 |
| AN525-832R7   | 2  | 89    | 0 |
| D3802-1       | 2  | 143   | 0 |
| D4434-041     | 1  | 0     | 0 |
| D4434-047     | 1  | 5     | 0 |
| D4435-9       | 2  | 20    | 0 |
| D4436-041     | 1  | 1     | 0 |
| D4441-1       | 2  | 539   | 0 |
| D4971-041     | 1  | 4     | 0 |
| MS21042L06    | 7  | 157   | 0 |
| MS21042L08    | 2  | 1,120 | 0 |
| MS21042L3     | 5  | 2,273 | 0 |
| MS21059L3     | 2  | 160   | 0 |
| MS35206-229   | 7  | 69    | 0 |
| NAS1149F0332P | 10 | 847   | 0 |
| NAS1149FN616P | 14 | 165   | 0 |
| NAS1149FN816P | 2  | 227   | 0 |

#### Part Specifications

Specifications could not be found.

Plex 11/22/18 1:49 PM Dart.lajeunesse.marie



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------|-----------------------------------------------|------------------------------------|-------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="width: 15%;">Skid-tube <input type="checkbox"/></td> <td style="width: 15%;">Cross tube <input type="checkbox"/></td> <td style="width: 15%;">Water Jet <input type="checkbox"/></td> <td style="width: 15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                                                            |                                                |                                               | Skid-tube <input type="checkbox"/> | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Cross tube <input type="checkbox"/>                                                                                                                                                | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Engineering <input type="checkbox"/>                       |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Quality <input type="checkbox"/>                           |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Other <input type="checkbox"/>                             |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Date : _____                                                 | Step #: _____                                                                                                                                                                      | QTY Effective : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                            | MRB (QSI042) Approval                          |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Description Work Order Deviation                             |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                            | Completed By                                   |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            | Lead hand / Supervisor Approval Verification   |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            | QC / QA Coordinator Approval                   |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Root Cause                                                   |                                                                                                                                                                                    | FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Environment <input type="checkbox"/>                         | No Re-verification <input type="checkbox"/>                                                                                                                                        | Pressure/Forced <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Temperature/Cure <input type="checkbox"/>                  | Power Loss/Surge <input type="checkbox"/>      | Positioned Wrong <input type="checkbox"/>     |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Design <input type="checkbox"/>                              | Operator <input type="checkbox"/>                                                                                                                                                  | Bending <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Set-up <input type="checkbox"/>                            | Folio/Program <input type="checkbox"/>         | Outside Dimensions <input type="checkbox"/>   |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>                            | Offset/Setup <input type="checkbox"/>                                                                                                                                              | Centre Not Concentric <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | BOM/Route <input type="checkbox"/>                         | Grain <input type="checkbox"/>                 | Over/Under tolerance <input type="checkbox"/> |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>                       | Supplier <input type="checkbox"/>                                                                                                                                                  | Cracks <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Broken/Damage/Defect <input type="checkbox"/>              | Weld <input type="checkbox"/>                  | Part Incorrect <input type="checkbox"/>       |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Handling/Pre <input type="checkbox"/>                        | Training <input type="checkbox"/>                                                                                                                                                  | Crimp/Kink/Ripple/Wave <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/>    | Part Lost/Missing <input type="checkbox"/>    |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>                            | Use for Testing <input type="checkbox"/>                                                                                                                                           | Cuffs <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Contamination <input type="checkbox"/>                     | Out of Sequence <input type="checkbox"/>       | Part Moved <input type="checkbox"/>           |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Internal Transport <input type="checkbox"/>                  | Poor Information <input type="checkbox"/>                                                                                                                                          | Crushing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Countersink <input type="checkbox"/>                       | Off-set <input type="checkbox"/>               | Drawing <input type="checkbox"/>              |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Tribal Knowledge <input type="checkbox"/>                    | Rushing <input type="checkbox"/>                                                                                                                                                   | Heat Treat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Cut Too Short <input type="checkbox"/>                     | Mislabeled <input type="checkbox"/>            | Finish <input type="checkbox"/>               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| LOA <input type="checkbox"/>                                 | Product Improvement <input type="checkbox"/>                                                                                                                                       | Wave/Twist in Tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Instructions Incomplete/Unclear <input type="checkbox"/>   | Fit/Function <input type="checkbox"/>          | Misread <input type="checkbox"/>              |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Substation <input type="checkbox"/>                          | Process Improvement <input type="checkbox"/>                                                                                                                                       | Marks/Chatter <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Drill Holes <input type="checkbox"/>                       | Misaligned/off center <input type="checkbox"/> | Turning Sequence <input type="checkbox"/>     |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Past Expiry Date <input type="checkbox"/>                    | Manufacturing Process <input type="checkbox"/>                                                                                                                                     | OTHER : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Misidentified <input type="checkbox"/>                       | Past Due <input type="checkbox"/>                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                                |                                               |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |



## 2.0 Parts List



REFERENCE ONLY

| Qty<br>-141 | Qty<br>-143 | Qty<br>-145 | Qty<br>-147 | Part Number   | Description                                                       |
|-------------|-------------|-------------|-------------|---------------|-------------------------------------------------------------------|
| X           |             |             |             | D350-567-141  | FLOOR WINDOW CLOSE-OUT KIT<br>(REGULAR SEATS)                     |
|             | X           |             |             | D350-567-143  | FLOOR WINDOW CLOSE-OUT KIT<br>(ENERGY ATTENUATING SEATS)          |
|             |             | X           |             | D350-567-145  | FLOOR WINDOW CLOSE-OUT KIT<br>(AS 350B3e)                         |
|             |             |             | X           | D350-567-147  | FLOOR WINDOW CLOSE-OUT KIT<br>(AS 350B3e WITH GARMIN TRANSPONDER) |
| 1           | 1           | 1           | 1           | D3802-1-024   | SEAL (24")                                                        |
| 1           | 1           |             |             | D4434-041     | FWD BRACKET ASSEMBLY                                              |
| 1           | 1           |             |             | D4434-047     | COVER ASSEMBLY                                                    |
| 1           |             |             |             | D4435-045     | T/R BELLCRANK COVER ASSEMBLY                                      |
| 2           | 2           | 2           | 2           | D4435-9       | BRACKET                                                           |
| 1           | 1           | 1           |             | D4436-041     | AFT BRACKET ASSEMBLY                                              |
|             |             |             | 1           | D4436-047     | AFT BRACKET ASSEMBLY                                              |
| 1           | 1           | 1           | 1           | D4441-1-240   | RUBBER SEAL (24")                                                 |
|             |             | 1           | 1           | D4730-020-030 | VELCRO STRIP                                                      |
|             | 1           | 1           | 1           | D4971-041     | T/R BELLCRANK COVER ASSEMBLY                                      |
|             |             | 1           |             | D5076-041     | FWD BRACKET ASSEMBLY                                              |
|             |             |             | 1           | D5076-047     | FWD BRACKET ASSEMBLY                                              |
| 7           | 5           | 5           | 5           | AN3-3A        | BOLT                                                              |
| 2           | 2           | 2           | 2           | AN525-10R6    | SCREW                                                             |
| 2           | 2           | 2           | 2           | AN525-832R7   | SCREW                                                             |
|             |             | 1           | 1           | CB 200        | 3.5g ACRYLIC ADHESIVE                                             |
| 7           | 7           | 7           | 7           | MS21042L06    | NUT (OR MS21042-06)                                               |
| 2           | 2           | 2           | 2           | MS21042L08    | NUT (OR MS21042-08)                                               |
| 5           | 5           | 5           | 5           | MS21042L3     | NUT (OR MS21042-3)                                                |
| 2           | 2           | 2           | 2           | MS21059L3     | NUTPLATE                                                          |
| 7           | 7           | 7           | 7           | MS35206-229   | SCREW                                                             |
| 12          | 10          | 10          | 10          | NAS1149F0332P | WASHER (AN960-10L)                                                |
| 14          | 14          | 14          | 14          | NAS1149FN616P | WASHER (OR AN960-6L)                                              |
| 2           | 2           | 2           | 2           | NAS1149FN816P | WASHER (OR AN960-8L)                                              |



REFERENCE ONLY

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED

BY:   
D. SHEPHERD (DE # 02)

DATE: 18.09.22  
CERT. NO.: SH92-18  
ISSUE NO.: 6

APPROVED

|            |          |                                                                                                                                                                                                                                                                                 |               |
|------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| DESIGN     | RF       | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                        |               |
| DRAWN      | VS       |                                                                                                                                                                                                                                                                                 |               |
| CHECKED    | PM       | DRAWING NO.                                                                                                                                                                                                                                                                     | REV. G        |
| MFG. APPR. | N/A      | DSI 9590                                                                                                                                                                                                                                                                        | SHEET 2 OF 21 |
| APPROVED   | WK       | TITLE                                                                                                                                                                                                                                                                           | SCALE         |
| DE APPR.   | DS       | FLOOR WINDOW CLOSE-OUT KIT                                                                                                                                                                                                                                                      | NTS           |
| DATE       | 18.09.22 | COPYRIGHT © 2012 BY DART AEROSPACE LTD.<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br>NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br>WRITTEN PERMISSION FROM DART AEROSPACE LTD. |               |

NO OTHERS

REFERENCE ONLY



## 2.0 Parts List

REFERENCE ONLY

| Qty<br>-141 | Qty<br>-143 | Qty<br>-145 | Part Number   | Description                                           |
|-------------|-------------|-------------|---------------|-------------------------------------------------------|
| X           |             |             | D350-567-141  | FLOOR WINDOW CLOSE-OUT KIT (REGULAR SEATS)            |
|             | X           |             | D350-567-143  | FLOOR WINDOW CLOSE-OUT KIT (ENERGY ATTENUATING SEATS) |
|             |             | X           | D350-567-145  | FLOOR WINDOW CLOSE-OUT KIT (AS 350 B3e)               |
| 1           | 1           | 1           | D3802-1-024   | SEAL (24")                                            |
| 1           | 1           |             | D4434-041     | FWD BRACKET ASSEMBLY                                  |
| 1           | 1           |             | D4434-047     | COVER ASSEMBLY                                        |
| 1           |             |             | D4435-045     | T/R BELLCRANK COVER ASSEMBLY                          |
| 2           | 2           | 2           | D4435-9       | BRACKET                                               |
| 1           | 1           | 1           | D4436-041     | AFT BRACKET ASSEMBLY                                  |
| 1           | 1           | 1           | D4441-1-240   | RUBBER SEAL (24")                                     |
|             |             | 1           | D4730-020-030 | VELCRO STRIP                                          |
|             | 1           | 1           | D4971-041     | T/R BELLCRANK COVER ASSEMBLY                          |
|             |             | 1           | D5076-041     | FWD BRACKET ASSEMBLY                                  |
| 7           | 5           | 5           | AN3-3A        | BOLT                                                  |
| 2           | 2           | 2           | AN525-10R6    | SCREW                                                 |
| 2           | 2           | 2           | AN525-832R7   | SCREW                                                 |
|             |             | 1           | CB 200        | 3.5g ACRYLIC ADHESIVE                                 |
| 7           | 7           | 7           | MS21042L06    | NUT (OR MS21042-06)                                   |
| 2           | 2           | 2           | MS21042L08    | NUT (OR MS21042-08)                                   |
| 5           | 5           | 5           | MS21042L3     | NUT (OR MS21042-3)                                    |
| 2           | 2           | 2           | MS21059L3     | NUTPLATE                                              |
| 7           | 7           | 7           | MS35206-229   | SCREW                                                 |
| 12          | 10          | 10          | NAS1149F0332P | WASHER (AN960-10L)                                    |
| 14          | 14          | 14          | NAS1149FN616P | WASHER (OR AN960-6L)                                  |
| 2           | 2           | 2           | NAS1149FN816P | WASHER (OR AN960-8L)                                  |

## 3.0 Weight and Balance

The following is the net weight increase associated with the D350-567-141/-143/-145 Kits.

| Installation               | Weight  | LATERAL |            | LONGITUDINAL |             |
|----------------------------|---------|---------|------------|--------------|-------------|
|                            |         | Arm     | Moment     | Arm          | Moment      |
| D350-567-141/-143/-145     | 3.9 lb  | 17.9 in | 69.8 in-lb | 65.5 in      | 255.5 in-lb |
| Floor Window Close-out Kit | 1.77 kg | 0.45 m  | 0.80 m-kG  | 1.66 m       | 2.94 m-kG   |

## 4.0 Installation Procedure

### Notes:

- Figure 2 shows the general arrangement and installation of the D350-567-141/-143/-145 Close-out Kits. The procedure that follows outlines the step-by-step procedures for installing the kit with reference photos from the initial installation.
- In conjunction with this modification, it is acceptable to remove the interior floor windows as applicable. Note that the structural reinforcement around the window opening is still required.
  - D350-567-115 - OK to remove D3295-041
  - D350-567-031 - OK to remove D3212-1
  - D350-567-011 - OK to remove D2214
  - D350-567-021 - OK to remove D2951
- It is acceptable to drill/trim the D350-567-141/-143/-145 Close-out Kits as required to improve fit.

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED

BY:   
D. SHEPHERD (DE # 02)

DATE: 15.01.12  
CERT. NO.: SH92-18  
ISSUE NO.: 6

|                                                                                                                                                                                                                                |                                                                                     |                                        |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------|---------------|
| DESIGN                                                                                                                                                                                                                         | RF                                                                                  | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN                                                                                                                                                                                                                          | AJS                                                                                 | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED                                                                                                                                                                                                                        |  | DRAWING NO.                            | REV. F        |
| MFG. APPR.                                                                                                                                                                                                                     | N/A                                                                                 | DSI 9590                               | SHEET 2 OF 19 |
| APPROVED                                                                                                                                                                                                                       |  | TITLE                                  | SCALE         |
| DE APPR.                                                                                                                                                                                                                       |  | FLOOR WINDOW CLOSE-OUT KIT             | NTS           |
| DATE                                                                                                                                                                                                                           | 15.01.12                                                                            | COPYRIGHT © 2012 BY DART AEROSPACE LTD |               |
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